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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Date of Deposit: November 10, 2004

Typed Name of Person Mailing Paper or Fee: Thomas Olson

Signature: Thomas Olson

**PATENT APPLICATION**

**DOCKET NO. 10007009-1**

**IN THE  
UNITED STATES PATENT AND TRADEMARK OFFICE**

**INVENTORS: Jeffrey Balluff et al.**

**CONFIRMATION NO.: 2802**

**SERIAL NO.: 09/864,738**

**GROUP ART UNIT: 2654**

**FILING DATE: 05/23/2001**

**EXAMINER: Azad, Abdul K.**

**TITLE: TELECOMMUNICATION APPARATUS AND METHODS**

**Mail Stop: AMENDMENT  
Commissioner For Patents  
P.O. BOX 1450  
Alexandria, VA 22313-1450**

**REPLY TO OFFICE ACTION MAILED ON 08/10/04**

**SIR OR MADAM:**

This Communication is in response to the Office action mailed on 08/10/04.

**Claim Summary:**

Claims hereby amended: 1, 5, 9-11, and 15-17.

Claims hereby canceled: 4.

Claims hereby added: none.

Claims remaining: 1-3 and 5-20.

*Docket No. 10007009-1  
Response to Office Action  
mailed on 08/10/2004*

HEWLETT-PACKARD COMPANY  
Intellectual Property Administration  
P.O. Box 272400  
Fort Collins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO. 10007009-1

IN THE  
UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Jeffrey Balluff et al.

Confirmation No.: 2802

Application No.: 09/864,738

Examiner: Azad, Abdul K.

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Group Art Unit: 2654

Title: Telecommunication Apparatus and Methods

Mail Stop  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- (X) Response/Amendment ( ) Petition to extend time to respond  
( ) New fee as calculated below ( ) Supplemental Declaration  
(X) No additional fee  
(X) Other: Return Receipt Post Card (fee \$           )

CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	-19-	MINUS	-20-	= 0	X	\$0.00
INDEP. CLAIMS	-4-	MINUS	-4-	= 0	X	\$0.00
[ ] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+	\$
EXTENSION FEE	1ST MONTH	2ND MONTH	3RD MONTH	4TH MONTH	\$	
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

Charge \$0.00 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

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Date of Deposit: Nov. 10, 2004

Typed Name: Thomas Olson

Signature: Thomas Olson

Respectfully submitted,

Jeffrey Balluff and  
Robert Seseck

By Thomas Olson

Thomas Olson  
Attorney/Agent for Applicant(s)  
Reg. No. 44,271

Date: Nov. 10, 2004